Notice of Intent (NOI) for Pesticide Discharges



Wyoming Pollutant Discharge Elimination System (WYPDES)

Department of Environmental Quality Application for Permit to Discharge Wastewater for:

Notice of Intent for Pesticides Discharges

Modified: June 17, 2013

The general permit for pesticides discharges currently authorizes the discharge of pesticides to, over, in water, or at water's edge, of surface waters of the state associated with:

- **Mosquito and Other Flying Insect Pest Control**
- Weed and Algae Control
- **Nuisance Animal Control**
- **Forestry Canopy Pest Control**
- Class 1 Waters Discharges (for those discharging to, over, in water, or at water's edge of state designated
 - Class 1 Waters)
- Opt-In Category (for those who don't meet minimum threshold requirements, or who practice a pesticides use that is inconsistent with the categories listed above, and who desire to be covered for discharges associated with pesticide uses)
- Minimum thresholds:

Treatment Area Thresholds for each Individual Treatment Area					
PGP PART	Pesticide Use Pattern	Threshold (all discharges to Class 1 waters of the state are required to submit an NOI).			
Part I, Section 1.1.1	Mosquitoes and Other Flying Insect Pests	640 acres of treatment area for larvacide use.			
Part I, Section 3.4.1		6400 acres of treatment area for adulticide use.			
Part I, Section 1.1.1	In Water: Weeds and Algae	80 acres of treatment area			
Part I, Section 3.4.2	At Waters Edge: Weeds and Algae	20 linear miles of treatment area at water's edge			
Part I, Section 1.1.1	In Water: Nuisance Animals	80 acres of treatment area			
Part I, Section 3.4.3	At Waters Edge: Nuisance Animals	20 linear miles of treatment area at water's edge			
Part I, Section 1.1.1 Part I, Section 3.4.4	Forest Canopy	6400 acres of forest canopy			
Part I, Section 1.1.1 Part I, Section 3.4.6	Opt-In: Any entity or individual not otherwise eligible or who have a use category not fitting in the five use patterns listed above may Opt-In to permitting for pesticides discharges.	There are no minimum thresholds; all are required to submit an NOI.			

The pesticides discharged from any of these activities must not have the potential to contribute violations of any water quality standards. For more details such as effluent limits and monitoring requirements, please read and review the General Permit for Pesticide Discharge found on-line at (not available vet).

Please Note: An NOI is only required to be submitted if all of the following four conditions are satisfied:

- You are an applicator or a decision maker who is also applying the pesticides; and
 You discharge pesticides related to one of the four pesticide use patterns listed above; and
- 3. For a single project, you exceed a treatment area threshold value listed in the table above; and
- 4. You discharge pesticides to a Water of the US in Wyoming.
 - a) Drainages that have water in it (live water). Dry drainages are not considered to be a Water of the US in Wyoming.

Mail or hand deliver the application to:

WYPDES Permits Section
Department of Environmental Quality/WQD
122 West 25th Street, Herschler Building, 4W
Cheyenne, WY 82002

(An original signature of the applicant is required. Faxes cannot be accepted)

When to file:

The Notice of Intent (NOI) must be submitted at least 30 days prior to the first anticipated date of discharge.

General Application Instructions:

- 1. Please provide as much information as possible on the application form. Additional spaces may be inserted in the application form to accommodate additional information.
- 2. Please provide a response to <u>ALL</u> items, even if it is to indicate that the item is "not applicable". Leaving items blank may result in the application being returned as incomplete.
- 3. Do not staple or bind any of the permit application materials. Use only binder clips or paper clips.
- 4. Please provide an email address when possible.

Official	Use	Only)
Official	USC	Om	1



Wyoming Pollutant Discharge Elimination System (WYPDES)

Department of Environmental Quality
Application for Permit to Discharge Pesticides for:

Notice of Intent for Pesticide Discharges

New: 10-08-2010

- ✓ Please print or type. Submission of illegible materials will result in return of the application to the applicant.
- ✓ All items must be completed accurately and in their entirety or the application will be deemed incomplete and the processing will be delayed or application returned.
- ✓ An original signature of the applicant is required. Faxes cannot be accepted.
- ✓ Fees: Permits issued under the WDEQ (Wyoming Department of Environmental Quality) program are subject to an annual \$100 permit fee as long as the permit is active. The annual billing cycle is based on the calendar year. There is no need to pay the fee with the application. All permit fees are invoiced after January 1st of each year.
- ✓ The Notice of Intent (NOI) must be submitted at least 30 days prior to the first anticipated date of discharge.
- 1. **Contact Information:** The applicator is the company, organization or individual that has day-to-day supervision and control of activities occurring at the discharge site and which will be the permit holder.

Permittee Contact Name:	If applicable, Consultant Contact Name:
Company Name:	Company Name:
Mailing Address:	Mailing Address:
City, State, and Zip Code:	City, State, and Zip Code:
Telephone Number:	Telephone Number:
Fax number:	Fax number:
E-Mail Address:	E-Mail Address:

2. Location of establishment where records will be maintained:				
Name:				
Street Address (if applicable)				
Street Address (if applicable):				

3. Treatment Area Location(s) (Add additional spaces as necessary or list on another sheet of paper) LIST ONLY THOSE SITES THAT REQUIRE THE SUBMITTAL OF AN NOI. It meets/exceeds a threshold or is a Class 1 water of the state.:

the state.									
Pesticide Use Pattern (if for mosquito control; indicate whether larvicide or adulticide)	Address [†]	Water Body (if name known)	Acres Or Miles ²	Sectio n	Townshi p	Range	Count y	Duration of project (months or days)	Landowne rwhere application taking place.
,									
² Specify mi 4. Check that excee pattern(s) F N N F 5. Attach	the box (es) corresponding ed treatment area threshold: For Opt-In Permitting; che Please note, only one NOI he Mosquito and Other Flying Need and Algae Control Juisance Animal Control Forest Canopy Pest Control Scharges to Waters Desi Opt-In Permitting ments: ojects: Attach a site map the ring the permit coverage.	to the type of pestics. For applications suck the Opt-In box are as to be submitted Inset Pest Control of Inset as Class 1	ide use patito Class 1 vand the use patito Class 2 vand the use patito Class 3 vand th	tern applyvaters; choattern(s).	eck the Cla	ass 1 Wat	er box ar	nd the use	·eas
6 Other i	nformation:								
	nal information the applica	tor wishes to have c	onsidered:						
	, 11								

7. Certification: I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. In addition, I certify that I am aware of the terms and conditions of the General Permit for Pesticide Discharges and I agree to comply with those requirements.

	Discharges and ragree to comply with those	requirements.			
Authorized signatories for this application	tion are the following:				
For corporations:	A principal executive officer of at least the level of vice president, or the manager of one or more manufacturing, production, or operating facilities, provided the manager is authorized to make management decisions which govern the overall operation of the facility from which the discharge originates.				
For partnerships:	A general partner.				
For a sole proprietorship:	The proprietor.				
For a municipal, state, federal or other public facility:	Either a principal executive officer or ranking elected official.				
Printed Name of Person Sig	ning Title	· · · · · · · · · · · · · · · · · · ·			
Signature of Applicant*	Date	e Telephone			
Wyoming Statute 35-11-312 was payment of permit fees must be be returned. For complete inforr http://deq.state.wy.us/wqd/WYPl	es any false statement, representation, or cern \$10,000 or imprisoned for not more than or servised to require discharge permit fees be accompanied with the application. Any application related to permit fees, please visit our DES Permitting/index.asp. this general permit are variable. Please refer NOI.	paid prior to permit issuance. Therefore, cation received without proper fee payment will			
Check Number					
		For Agency Use Only			
		Date Check Received			
		Check Amount			
		Parmit Tarm			

Approval _____